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Bib Data Sheet

CONFIRMATION NO. 1281

SERIAL NUMBER 10/662,902	FILING DATE 09/15/2003 RULE	CLASS 548	GROUP ART UNIT 1626	ATTORNEY DOCKET NO. PO7781/LeA 35,909
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** CONTINUING DATA ***** *RB*

** FOREIGN APPLICATIONS ***** *RB*
 GERMANY 10243666.5 09/20/2002

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 12/04/2003

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged <i>RB</i> Examiner's Signature Initials	GERMANY	0	7	1

ADDRESS

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TITLE

Dithiocarbamic esters

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
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